DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

priority is claimed:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

AN ENDODONTIC OBTURATOR WITH REMOVABLE CARRIER AND METHOD OF USE THEREOF

the specification of which (check one)	
[X] is attached hereto.	
[] was filed on	as Application Serial No.
I hereby state that I have reviewed and un the claims, as amended by any amendme	derstand the contents of the above identified specification, including ent referred to above.
I acknowledge the duty to disclose info accordance with Title 37, Code of Fede	rmation which is material to the patentability of this application in tral Regulations, Section 1.56 (a).
I hereby claim foreign priority benefits application(s) for patent or inventor's	s under Title 35, United States Code, Section 119 of any foreign certificate listed below and have also identified below any foreign

application for patent or inventor's certificate having a filing date before that of the application to which

PRIOR FOREIGN API	PLICATION(S)	Priori	ity Claimed
(Number) (Country) (Day/month/year file	ed) Yes	[] No	[]
(Number) (Country) (Day/month/year filed)	Yes	[] No	[]
(Number) (Country) (Day/month/year filed)	Yes	[] No	[]
I hereby claim the benefit under Title 35, United States Co application(s) listed below: Provisional Application Number	ode, Section 119(e) of any United Filing Date	d States	provisional
(Number)	(Day/Month/Year Filed)		
(Number)	(Day/Month/Year Filed)		
(Number)	(Day/Month/Year Filed)		
I hereby claim the benefit under Title 35, United States C listed below and, insofar as the subject matter of each of prior United States application in the manner provided by Section 112, I acknowledge the duty to disclose which is Title 37, Code of Federal Regulations, Section 1.56 (a) application and the national or PCT international filing	f the claims of this application is y the first paragraph of Title 35, is material to patentability infor which occurred between the fil	not dis United mation	States Code as defined in
(Appl. Serial No.) (Filing date) (Status) (patented, pen			

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

(Appl. Serial No.) (Filing date) (Status) (patented, pending, abandoned)

POWER OF ATTORNEY: As named inventor, or named inventors, I (We) hereby appoint the following attorney(s) and/or agent(s):

Paul H. Johnson, Registration No. 19,224 Mark G. Kachigian, Registration No. 32,840 Brent A. Capehart, Registration No. 39,620

of Head, Johnson & Wachigian, 228 West 17th Place, Tulsa, Oklahoma 74119, Telephone Number (918) 587-2000, and

of Head, Johnson & Kachigian, 204 North Robinson, Suite 3030, Oklahoma City, Oklahoma 73102, Telephone Number (405) 236-4000, and

Robert R. Keegan, Registration No. 18,614 Daniel R. Alexander, Registration No. 32,604 Trent C. Keisling, Registration No. 36,565

of Head, Johnson & Kachigian, 112 West Center Street, Suite 230, Fayetteville, Arkansas, 72701, Telephone Number (501) 582-9111, all members duly authorized to practice law. Further, all foregoing attorneys are authorized to prosecute this application to register, to transact all business in the Patent and Trademark Office in connection therewith, and to receive the Letters Patent Document, if issued.

SEND CORRESPONDENCE AND TELEPHONE CALLS TO:

Paul H. Johnson
HEAD JOHNSON & KACHIGIAN
228 West 17th Place
Tulsa, OK 74119-4694
(918) 587-2000

Full name of first or sole inventor: Ralph C. Mays

Inventor's signature:

Residence:

Tulsa, Oklahoma

Citizenship:

United States of America

Post Office Address: 5436 South Mingo Road, Tulsa, Oklahoma 74146

Applicant or Patentee: Serial or Patent No:

Ralph C. Mays

Attorney's Docket No. PRO690/99408

Filed or Issued:

described in:

For: AN I

AN ENDODONTIC OBTURATOR WITH REMOVABLE CARRIER AND METHOD OF USE THEREOF

VERIFIED STATEMENT (DECLARATION)
CLAIMING SMALL ENTITY STATUS
[37 CFR SECTION 1.9 (f) and SECTION 1.27 (b)]
INDEPENDENT INVENTOR

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9 (c) for purposes of paying reduced fees under Section 41 (a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled:

AN ENDODONTIC OBTURATOR WITH REMOVABLE CARRIER AND METHOD OF USE THEREOF

[X]	the specification filed herewith.		
[]	Application Serial No.	filed	·
ίí	Patent No.	issued	

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9 (c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9 (d) or a nonprofit organization under 37 CFR 1.9 (e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey or license any rights in the invention is listed below:

[X]	no such person,	concern,	or organ	nization
[]p	ersons, concerns	or organ	izations	listed below*

* NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. [37 CFR 1.27].

ADDRESS:	[X] INDIVIDUAL [] SMALL BUSINESS CONCERN [] NONPROFIT ORGANIZATION
FULL NAME: ADDRESS:	[] INDIVIDUAL [] SMALL BUSINESS CONCERN [] NONPROFIT ORGANIZATION
FULL NAME: ADDRESS:	[] INDIVIDUAL [] SMALL BUSINESS CONCERN
	[] NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. [37 CFR 1.28(b)].

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF INVENTOR

Ralph C. Mays

Date